

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GUN RIGHTS AMERICA

ADDRESS (number and street)

2300 W EISENHOWER BLVD

Check if different  
than previously  
reported. (ACC)

LOVELAND

CO

80537-3150

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00742635

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

BACKER, DAN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

BACKER, DAN, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GUN RIGHTS AMERICA

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 11 24 2020

To:

 M M / D D / Y Y Y Y  
 12 31 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	122268.31	
(c) Total Receipts (from Line 19) .....	501.00	233346.02
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	122769.31	233346.02
7. Total Disbursements (from Line 31).....	12899.83	123476.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	109869.48	109869.48
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	703.66	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**GUN RIGHTS AMERICA**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	119050.02
(ii) Unitemized .....	501.00	89132.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	501.00	208182.77
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	501.00	233182.77
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	163.25
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	501.00	233346.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	501.00	233346.02

# **DETAILED SUMMARY PAGE** of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	9072.50	16174.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9072.50	16174.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	3827.33	107202.05
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12899.83	123476.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12899.83	123476.54

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	501.00	233182.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	501.00	233082.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	9072.50	16174.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	163.25
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	9072.50	16011.24

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XN  
Transaction ID :

THE FOLLOWING TRANSACTION ID #S REFER TO ESTIMATED IES FILED BY THE COMMITTEE THAT WERE NOT, ULTIMATELY, EXECUTED: ...4C1FA11 AND 490FA04

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. EL TORO**

Mailing Address 124 N 1ST ST

City  
LOUISVILLEState  
KYZip Code  
40202-1357Purpose of Disbursement  
UNSPENT FUNDS IN IE BUDGET, BALANCE CARRIED FORWARD BY  
VENDOR  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				30				2020					

FEC Identification Number

**C**

Transaction ID : B5FC31FBC0

Amount of Each Disbursement this Period

9000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MUDSHARE**Mailing Address 325 E JIMMIE LEEDS RD  
STE 117City  
GALLOWAYState  
NJZip Code  
08205-4126Purpose of Disbursement  
UNSPENT FUNDS IN IE BUDGET, BALANCE CARRIED FORWARD BY  
VENDOR  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2020					

FEC Identification Number

**C**

Transaction ID : B402B73DCE

Amount of Each Disbursement this Period

67.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2020					

FEC Identification Number

**C**

Transaction ID : BD7DF07D5E

Amount of Each Disbursement this Period

4.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9072.50

9072.50

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 8 OF 13

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GUN RIGHTS AMERICA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**Nature of Debt (Purpose):  
FUNDRAISING EMAILS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

703.66

Transaction ID : D25AB4BF4DE0C4A5A96E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

703.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

703.66

2) **TOTALS** This Period (last page this line number only)..... ►

703.66

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

703.66



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 9 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CPMM SERVICES GROUP INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>3785 INDIANOLA AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1197.44</div>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43214-3754</b>	<b>Transaction ID : E17F976E1DC964A829ED</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PMT FOR EST FROM 12/29/2020. MAIL VOTER CONTACT: SEE EST TRANS ID: ...45C29D1</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate: <b>WARNOCK, RAPHAEL, ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7667.33</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <b>GENERAL RUNOFF</b>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CPMM SERVICES GROUP INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>3785 INDIANOLA AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1197.44</div>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43214-3754</b>	<b>Transaction ID : EEE2856C147C643A6A6B</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PMT FOR EST FROM 12/29/2020. MAIL VOTER CONTACT: SEE EST TRANS ID: ...47CBBAE</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate: <b>OSSOFF, JONATHAN, T, ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7667.33</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <b>GENERAL RUNOFF</b>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	►	2394.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....	►	
(c) TOTAL Independent Expenditures .....	►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 10 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>EL TORO</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 28 / 2020		
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		
City LOUISVILLE		State KY	Zip Code 40202-1357		Transaction ID : <b>EAD4D50B6F0144C6EB41</b>
Purpose of Expenditure PMT FOR EST FROM 12/28/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4C1A81C			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 30 / 2020
Name of Federal Candidate: OSSOFF, JONATHAN, T, ,			Office Sought: <input type="checkbox"/> House District: <input checked="" type="checkbox"/> Senate State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5272.45</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <b>GENERAL RUNOFF</b>		
Full Name of Payee <b>EL TORO</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 28 / 2020		
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		
City LOUISVILLE		State KY	Zip Code 40202-1357		Transaction ID : <b>EF65C1843AA6D41E68B9</b>
Purpose of Expenditure PMT FOR EST FROM 12/28/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4241879			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 30 / 2020
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			Office Sought: <input type="checkbox"/> House District: <input checked="" type="checkbox"/> Senate State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5272.45</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <b>GENERAL RUNOFF</b>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 01 / 29 / 2021	
Signature					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 11 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>MUDSHARE</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 14 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">114.71</span>		
City GALLOWAY		State NJ	Zip Code 08205-4126		Transaction ID : E1BBB334B74BD42E2AA5
Purpose of Expenditure PMT FOR EST FROM 12/14/2020. TEXTING SERVICES: SEE TRANS ID#:...4730A37.			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 14 / 2020
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: GA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4069.41</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► GENERAL RUNOFF		
Full Name of Payee <b>MUDSHARE</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 14 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">114.70</span>		
City GALLOWAY		State NJ	Zip Code 08205-4126		Transaction ID : E7166AC04043F48379DA
Purpose of Expenditure PMT FOR EST FROM 12/14/2020. TEXTING SERVICES: SEE TRANS ID#:...403687A			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 14 / 2020
Name of Federal Candidate: OSSOFF, JONATHAN, T, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: GA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4069.41</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► GENERAL RUNOFF		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">229.41</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2021	
Signature					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 12 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>MUDSHARE</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 18 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">101.52</span>		
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : E235EA8BE7DAC43F3A54		
Purpose of Expenditure PAYMENT FOR 12/14 ESTIMATE. TEXTING SERVICES: SEE TRANS ID#:...4730A37.		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 14 / 2020		
Name of Federal Candidate: WARNOCK, RAPHAEL, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: GA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4272.45</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► GENERAL RUNOFF		
Full Name of Payee <b>MUDSHARE</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 18 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">101.52</span>		
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : EBCFE21122C994660B66		
Purpose of Expenditure PAYMENT FOR 12/14 ESTIMATE. TEXTING SERVICES: SEE TRANS ID#:...403687A		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 14 / 2020		
Name of Federal Candidate: OSSOFF, JONATHAN, T, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: GA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4272.45</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► GENERAL RUNOFF		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">203.04</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 01 / 29 / 2021	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>PATTERSON CONSULTING, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 14 / 2020	
Mailing Address 866 LOMBARD RD				Amount <span style="border: 1px solid black; padding: 2px;">1920.00</span>	
City RISING SUN		State MD	Zip Code 21911-1738	Transaction ID : E5C45CC09F7804C1FA11	
Purpose of Expenditure ESTIMATED GA RUNOFF PHONE VOTER CONTACT			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: WARNOCK, RAPHAEL, ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4069.41</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► GENERAL RUNOFF	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>PATTERSON CONSULTING, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 14 / 2020	
Mailing Address 866 LOMBARD RD				Amount <span style="border: 1px solid black; padding: 2px;">1920.00</span>	
City RISING SUN		State MD	Zip Code 21911-1738	Transaction ID : E22DC5666F90490FA04	
Purpose of Expenditure ESTIMATED GA RUNOFF PHONE VOTER CONTACT			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: OSSOFF, JONATHAN, T, ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4069.41</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► GENERAL RUNOFF	
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">3827.33</span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2021	

[Electronically Filed]